



STATE OF MONTANA

DEPARTMENT OF LABOR AND INDUSTRY

BOARD OF PERSONNEL APPEALS

DEPARTMENT OF TRANSPORTATION
GRIEVANCE

FORMAL APPEALS STEPS

(Each step should be dated as initiated by the employee)

I Date _____

II Date _____

III Date _____

- 1. Name of Employee: _____
Last First Middle Initial
- 2. Home Address: _____ Work Phone: _____ Home Phone: _____
- 3. Designated Representative (if any): _____
- 4. Present Classification: _____
Classification Code: _____ Position Number: _____
- 5. Department: _____ Address (Building and Street) _____
Division: _____ City: _____
Bureau: _____ Room Number: _____ Business Phone: _____
Section: _____ Unit: _____

Has there been an information attempt to resolve the appeal in question? _____

The appeals procedure is detailed in Board of Personnel Appeals Rules and Regulations ARM 24.26.303. (Copies available in each departmental personnel office) Any effort to impede the appeal process should be reported to the Board of Personnel Appeals

**STEP
I**

I hereby invoke the formal appeals procedure guaranteed in Section 2-18-1001 MCA, as outlined in ARM 24.26.303. I certify that all facts stated here are correct to the best of my knowledge and belief.

Employee's Signature

Date

Discuss the reason for this appeal and possible solutions to the problem.*

Continuance of the appeal – Submission to immediate supervisor: _____
Date: _____

Findings of immediate supervisor: _____
Date appeal received: _____
Date appeal returned to employee: _____

Signature: _____

**STEP
II**

Continuance of appeal - Submission to Department Head:

Date Received: _____

Findings of Department Head: _____
Date appeal returned to Employee: _____

Signature: _____

**STEP
III**

Continuance of appeal - submission to Board of Personnel Appeals for final resolution

Date Received: _____

Findings and decision of the Board of Personnel Appeals:*
(additional comments will be attached) Date appeal returned to Employee: _____

**If there are any questions concerning appeal procedure, contact the Board of Personnel Appeals,
PO Box 6518, Helena, MT 59604-6518, Telephone: (406)444-2718**